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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/827,538	04/19/2004	Yung-Liang Chang	C86.12-0004	3432
27367	7590 11/06/2006		EXAMINER	
	CHAMPLIN & KELI	LY, P.A.		
SUITE 1400 900 SECOND AVENUE SOUTH			ART UNIT	PAPER NUMBER
MINNEAPOL	LIS, MN 55402-3319			

DATE MAILED: 11/06/2006

Please find below and/or attached an Office communication concerning this application or proceeding.

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## Notice of Non-Compliant Amendment (37 CFR 1.121)

Application No.	Applicant(s)	
10827538		
Examiner	Art Unit	-

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

The amendment document filed on <u>19 April 2004</u> is considered non-con requirements of 37 CFR 1.121 or 1.4. In order for the amendment documents item(s) is required.	npliant because it has failed to meet the ment to be compliant, correction of the following			
THE FOLLOWING MARKED (X) ITEM(S) CAUSE THE AMENDMENT    1. Amendments to the specification:  A. Amended paragraph(s) do not include markings.  B. New paragraph(s) should not be underlined.  C. Other	DOCUMENT TO BE NON-COMPLIANT:			
☐ 2. Abstract: ☐ A. Not presented on a separate sheet. 37 CFR 1.72. ☐ B. Other				
<ul> <li>3. Amendments to the drawings:</li> <li>A. The drawings are not properly identified in the top man "Annotated Sheet" as required by 37 CFR 1.121(d).</li> <li>B. The practice of submitting proposed drawing correction showing amended figures, without markings, in complementary.</li> <li>C. Other</li> </ul>	on has been eliminated. Replacement drawings			
<ul> <li>□ 4. Amendments to the claims:</li> <li>□ A. A complete listing of all of the claims is not present.</li> <li>□ B. The listing of claims does not include the text of all pending claims (including withdrawn claims)</li> <li>□ C. Each claim has not been provided with the proper status identifier, and as such, the individual status of each claim cannot be identified. Note: the status of every claim must be indicated after its claim number by using one of the following status identifiers: (Original), (Currently amended), (Canceled), (Previously presented), (New), (Not entered), (Withdrawn) and (Withdrawn-currently amended).</li> <li>□ D. The claims of this amendment paper have not been presented in ascending numerical order.</li> <li>□ E. Other:</li> </ul>				
5. Other (e.g., the amendment is unsigned or not signed in acc	cordance with 37 CFR 1.4):			
For further explanation of the amendment format required by 37 CFR 1.	121, see MPEP § 714.			
TIME PERIODS FOR FILING A REPLY TO THIS NOTICE:				
1. Applicant is given <b>no new time period</b> if the non-compliant amendment is an after-final amendment, an amendment filed after allowance, or a drawing submission (only). If applicant wishes to resubmit the non-compliant after-final amendment with corrections, the <b>entire corrected amendment</b> must be resubmitted.				
2. Applicant is given <b>one month</b> , or thirty (30) days, whichever is longer, from the mail date of this notice to supply the correction, if the non-compliant amendment is one of the following: a preliminary amendment, a non-final amendment (including a submission for a request for continued examination (RCE) under 37 CFR 1.114), a supplemental amendment filed within a suspension period under 37 CFR 1.103(a) or (c), and an amendment filed in response to a <i>Quayle</i> action. If any of above boxes 1. to 4. are checked, the correction required is only the <b>corrected section</b> of the non-compliant amendment in compliance with 37 CFR 1.121.				
Extensions of time are available under 37 CFR 1.136(a) only if the non-compliant amendment is a non-final amendment or an amendment filed in response to a Quayle action.				
Failure to timely respond to this notice will result in:  Abandonment of the application if the non-compliant amendment is a non-final amendment or an amendment filed in response to a Quayle action; or  Non-entry of the amendment if the non-compliant amendment is a preliminary amendment or supplemental amendments.				
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Legal Instruments Examiner (LIE), if applicable	Telephone No.			
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